



# DORCHESTER TOWN COUNCIL

Council Offices, 19 North Square, Dorchester, Dorset. DT1 1JF

Telephone: (01305) 266861 Fax: (01305) 266085

**Adrian Stuart, Town Clerk**

e-mail: [p.mullins@dorchester-tc.gov.uk](mailto:p.mullins@dorchester-tc.gov.uk)

Date as postmark

Dear Sir/Madam,

## **DORCHESTER BOROUGH GARDENS – PARK KEEPER**

Thank you for your interest in respect of the Park Keeper job based at Dorchester's Borough Gardens. Please find enclosed an Application Form, Job Description and Person Specification for the post. Please return your application by no later than noon on Friday 22 August, 2014.

If you do not hear from me within a fortnight of the closing date you may assume that you have not been successful in your application this time.

If you have any questions or queries please do not hesitate to contact me on 01305 266861.

Yours faithfully

Peter Mullins  
Compliance Manager

## **DORCHESTER TOWN COUNCIL**

**Name:**

**Post:** Park Keeper – Borough Gardens

### **JOB DESCRIPTION**

Under the direction of the Compliance Manager and or Operations Supervisor to undertake the following duties at Dorchester Borough Gardens:

1. To receive the payment and issue receipts in connection with any bookings of the tennis courts and other recreational amenities.
2. To regularly patrol the Borough Gardens, to maintain order and to ensure that the Council's byelaws and regulations relating to the use of the Gardens are complied with, if necessary summoning outside assistance.
3. To assist in the setting up of the Gardens for events if requested to do so by an Officer of the Council.
4. To monitor the Garden's litter bins and empty as necessary.
5. To make written reports to the Compliance Manager and/or Operations Supervisor on all incidents relating to Health and Safety that may occur during the time on duty.
6. To check the Gardens before locking up to ascertain that no members of the public are still inside.
7. To act under the direction of the Compliance Manager and or Operations Supervisor and to carry out all duties, whether or not specifically set out herein, as may be required from time to time.
8. To complete such paperwork, timesheets, etc. as may reasonably be required by the Council.

**Signed:**

**Date:**

# PERSON SPECIFICATION

## PARK KEEPER

	<b>Essential</b>	<b>Desirable</b>
<b>Qualifications</b>	Sound general education.	A knowledge of Health and Safety matters.
<b>Experience</b>		Previous experience in ensuring compliance with byelaws, rules or regulations.  Previous experience of working with the public.
<b>Skills</b>	Good inter-personal skills with both colleagues and the general public.	Working knowledge Information Technology.  Familiar with using hand radios.
<b>Attributes</b>	Able to work on your own.  Self-motivated.  Honest and conscientious.  Able to act on own initiative.	Adaptable.  Sense of humour.
<b>Circumstances</b>	Able to work evenings, weekends and Bank Holidays.	



# DORCHESTER TOWN COUNCIL JOB APPLICATION FORM

**Please complete in black ink and return to the address on the back page either by e-mail or post**

Please do not use staples for additional information sheets of paper  
All the sections of this form should be completed

## VACANCY DETAILS

<b>Appointment of Park Keeper</b>	<b>Closing Date: 22 August 2014</b>
Where did you see the advertisement?	

## PERSONAL DETAILS

<b>Surname:</b>		<b>First Names:</b>	
<b>Home Address:</b>		<b>Telephone Numbers/E-mail addresses:</b>	
		Private:	
		Work:	
		Mobile:	
		E-mail:	
<b>Postcode:</b>		Can we contact you at work? <b>YES / NO</b>	
NI Number:	Preferred Title:	Valid Driving Licence: <b>YES / NO / PROV</b>	
		Penalty Points: <b>YES / NO</b> No. ....	
		Car Owner: <b>YES / NO</b>	

Are you related to (or are you the spouse/partner of) any employee of Dorchester Town Council? **YES / NO**  
If yes please give details:

**Canvassing will disqualify your application or make you liable to dismissal if appointed.**

## EDUCATION AND TRAINING

From	To	Schools, Colleges, University, etc attended (latest first)	Qualifications attained (with grades)

## MEMBERSHIP OF PROFESSIONAL INSTITUTIONS

Organisation	Membership Status	Date Awarded

**EMPLOYMENT HISTORY (most recent jobs first)**

Please indicate all previous positions held (including any with this Council) **starting with the most recent.**

**Present Position:**

**Present Employer:**

**Location:**

**Date Started:**

**Current Salary:**

**Reason for wishing to leave:**

**Benefits:**

**From**

**To**

**Previous Positions**

**Employer and Location**

**Reason for Leaving**

**NOTICE**

Please state the period of notice you are required to give to your present employer:

**INFORMATION IN SUPPORT OF YOUR APPLICATION**

**This should include the following:**

1. Your reasons for applying for the job
2. How your skills, experience and personal qualities relate to the job requirements (please see the person specification on the job description). You are welcome to also include examples of voluntary or unpaid work which you feel support this. Please continue on a separate sheet if necessary.

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**b) Other referee**

**Name** ..... **Relationship to you** .....

**Job Title** .....

**Address** .....  
.....

**Phone** ..... **E-mail** .....

**Can we contact this referee prior to interview? YES / NO**

**SPARE TIME ACTIVITIES**

**ADDITIONAL INFORMATION**

Please give details of any convictions other than those which are 'spent' under the provisions of the Rehabilitation of Offenders Act 1974. Failure to disclose such convictions could result in dismissal. Any information given will be treated in the strictest confidence.

**MEDICAL INFORMATION**

Please state how many days sickness absence you have taken in the last 2 years, giving reasons. This also applies to periods of unemployment when you would have been unfit for work.

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I understand that the Council reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor). I understand that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act 1998 and I give my consent to this. Data may therefore be passed to other members or officers of the Council who require my information for legitimate business purposes.
3. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Disclosure Scotland for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the Council any offer of employment may be withdrawn or my employment terminated.

**Signed** .....

**Date** .....

**Completed applications should be sent to:**

The Town Clerk, Dorchester Town Council, 19 North Square, Dorchester, Dorset. DT1 1JF

**or: E-mail:** admin@dorchester-tc.gov.uk